

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Handwritten]</i>		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		4.9652	2/19/00
RESPONSE FORMALITY REVIEW		71476	11/17/00

### INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	02	7/1/00
2	✓	03	175
3	✓	03	04
4	✓	03	04
5	✓	03	04
6	✓	03	04
7	✓	03	04
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48	✓	03	04
49	✓	03	04
50	✓	03	04

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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